

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T-G		6/25/01
O.I.P.E. CLASSIFIER		59	7/21
FORMALITY REVIEW	K.D	121	8-3-01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted 0 ..... Objected

Claim	Date
Final	
Original	
1	10/9/01
	4/12/02
2	✓
3	N
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	
16	✓
17	✓
18	✓
19	✓
20	✓
21	N
22	✓
23	✓
24	N
25	✓
26	✓
27	✓
28	✓
29	N
30	N
31	N
32	N
33	N
34	✓
35	✓
36	✓
37	✓
38	✓
39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final	11/16/01
Original	4/12/02
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓
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47	✓
48	✓
49	✓
50	✓
51	✓
52	✓
53	✓
54	✓
55	✓
56	✓
57	✓
58	N
59	✓
60	✓
61	✓
62	✓
63	✓
64	✓
65	✓
66	✓
67	✓
68	✓
69	N
70	✓
71	N
72	✓
73	✓
74	✓
75	✓
76	✓
77	✓
78	✓
79	N
80	✓
81	
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93	
94	
95	
96	
97	
98	
99	
100	✓

Claim	Date
Final	11/16/01
Original	4/12/02
101	✓
102	N
103	N
104	✓
105	✓
106	✓
107	✓
108	✓
109	✓
110	✓
111	✓
112	✓
113	✓
114	✓
115	✓
116	✓
117	✓
118	✓
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If more than 150 claims or 10 actions  
staple additional sheet here

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